

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF Kenny Hill	COURT CASE NUMBER 05-160 Erie	
DEFENDANT Deborah Forsyth	TYPE OF PROCESS Civil Action	
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE { FCI Jessup AT { ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 2600 HWY. 310 S.; Jessup, GA 31599		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		
Kenny Hill #17110-016 FCC Petersburg Low Petersburg, VA 23804 P.O. Box 1000		Number of process to be served with this Form 285 one
		Number of parties to be served in this case Six
		Check for service on U.S.A. X

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Fold

Fold

Signature of Attorney other Originator requesting service on behalf of: <i>Mr. Kenny E. Hill</i>	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT		<i>11/29/05</i>

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below. I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
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Address (complete only if different than shown above)	Date <i>11/29/05</i>	Time am pm
	Signature of U.S. Marshal or Deputy <i>Shelly Blessey</i>	

Service Fee <i>Joe</i>	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges <i>Joe</i>	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS: C-117 1842 80205175 10-20-05

PRINT 5 COPIES:	1. CLERK OF THE COURT 2. USMS RECORD 3. NOTICE OF SERVICE 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal. 5. ACKNOWLEDGMENT OF RECEIPT	PRIOR EDITIONS MAY BE USED
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2. Article Number



7160 3901 9842 8020 5175

3. Service Type CERTIFIED MAIL

4. Restricted Delivery? (Extra Fee) Yes

1. Article Addressed to:

DEBORAH FORSYTH
PCI JESSUP
2600 HWY 310 S.
JESSUP, GA 31599

5-1608, S/C/O, 12/2005, SRB

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

D. S. JESSUP

B. Date of Delivery

12/1/05

C. Signature

D. S. JESSUP

Agent

Addressee

D. Is delivery address different from item 1?

If YES, enter delivery address below:

Yes

No